

(±)8-Amino-5,6,7,8-tetrahydroisoquinolines as novel antinociceptive agents

Małgorzata Dukat,^a Mohamed Taroua,^a Abdelaziz Dahdouh,^a
Umamaheswar Siripurapu,^a M. Imad Damaj,^b Billy R. Martin^b and Richard A. Glennon^{a,*}

^aDepartment of Medicinal Chemistry, School of Pharmacy, Virginia Commonwealth University, Richmond, VA 23298, USA

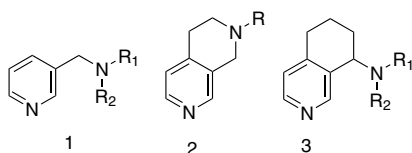
^bDepartment of Pharmacology and Toxicology, School of Medicine, Virginia Commonwealth University, Richmond, VA 23298, USA

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Abstract—Several amine-substituted 8-amino-5,6,7,8-tetrahydroisoquinolines were examined as conformationally-constrained analogs of the nicotinic cholinergic (nACh) 3-(aminomethyl)pyridines. Although these ligands failed to bind at nACh receptors, the *N*-ethyl-*N*-methyl analog **3d** was found to be at least equipotent with nicotine in rodent tests of antinociception. The mechanism of action of **3d** is currently unknown.

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Effective pain management is one of today's most serious unmet problems. Agents that bind at nicotinic acetylcholinergic (nACh) receptors offer a relatively novel and unexploited mechanistic approach to the treatment of pain. In the course of our studies we have investigated a variety of nACh receptor ligands including conformationally-constrained ligands (reviewed^{1,2}). For example, *N*-substituted 3-aminomethylpyridines such as **1** retain affinity for $\alpha 4\beta 2$ nACh receptors and possess antinociceptive properties.³ Although substitution at the pyridine 4-position has a tendency to reduce nACh receptor affinity,³ compounds such as **2**, which might be viewed as conformationally-constrained analogs of **1**, bind at nACh receptors and display antinociceptive character.⁴



Because the most pharmacologically relevant conformation of nicotinic agents remains to be determined (but see Ref. 5), we have explored other analogs of the aminomethylpyridines where the side chain has been constrained. In the present investigation, we prepared a series of 8-aminotetrahydroisoquinolines (i.e., **3**) as conformationally-constrained analogs of **1** in order to determine their nACh receptor affinities and examine their antinociceptive properties. In general, aryl-unsubstituted analogs of **1** display low affinity ($K_i > 500$ nM) for $\alpha 4\beta 2$ nACh receptors when the amine is a primary or secondary amine, or a tertiary amine where $R_1 = \text{Me}$ and $R_2 = n\text{-Pr}$; conversely, affinity is optimal ($K_i \leq 30$ nM) when $R_1 = \text{Me}$ and $R_2 = \text{Et}$, or where the amine is a pyrrolidine ring.^{1,3} Similar amine-substituted derivatives of **3** were prepared for comparison.

Aminotetrahydroisoquinolines prepared for this investigation (Scheme 1) are shown in Table 1. Oxidation of 5,6,7,8-tetrahydroisoquinoline (**4**) with KMnO_4 provided the known⁶ 5,6-dihydro-7*H*-isoquinolin-8-one (**5**), which was used as a common synthetic intermediate. Compound **5** was reductively aminated using sodium cyanoborohydride and the appropriate amine (method A) to afford target **3**. In method B, a methanolic solution of **5** was allowed to react with the MeNH_2 , under catalytic hydrogenation conditions to reduce the intermediate imine, to afford **3b**; **3b** was acylated with AcCl and the corresponding amide **6** was reduced to **3d** with

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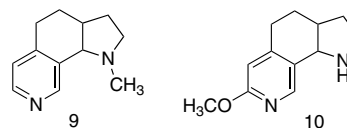
* Corresponding author. Tel.: +1-804-828-8487; fax: +1-804-828-7404;
e-mail: glennon@hsc.vcu.edu

^c Where antinociception was not observed, %MPE is reported for a 20–25 µg dose.

antinociceptive action in the mouse tail-flick assay (Table 2). Interestingly, compound **3d** was found to be twice as potent as (–)-nicotine. The antinociceptive actions of **3d** following subcutaneous administration were evident for 120 min, relative to 30 min for nicotine (data not shown). In addition, the antinociceptive effects, unlike those of nicotine, were not antagonized by the non-competitive nACh antagonist mecamylamine (1 mg/kg) nor the competitive antagonist dihydro- β -erythroidine (1 mg/kg) (data not shown). Similar results were obtained in the mouse hot-plate assay. Administered via the intrathecal route, **3d** was equipotent with (–)-nicotine in the tail-flick assay. In contrast, compounds **3a** and **3b** were inactive both in the tail-flick and hot-plate assays, whereas **3b** was nearly equipotent with **3d** and nicotine when administered via the intrathecal route. Compound **3c** was inactive in the tail-flick assay and nearly 20 times less potent than **3d** in the hot-plate assay. In summary, several of the compounds displayed antinociceptive action, but only **3d** was active under all three assay conditions—and was at least equipotent with (–)-nicotine in these assays.

With its low affinity for $\alpha 4\beta 2$ nACh receptors, and the inability to antagonize its effects with nACh antagonists, it is difficult to reconcile the actions of **3d** with a nicotinic receptor mechanism unless there is involvement of a nACh receptor subtype other than $\alpha 4\beta 2$ receptors. Compound **3d** was evaluated at several such subtypes and found to show little affinity: $\alpha 2\beta 2$ ($K_i = 10,200 \pm 1700$ nM), $\alpha 2\beta 4$ ($K_i = 49,900 \pm 4800$ nM), $\alpha 3\beta 2$ ($K_i = 4410 \pm 730$ nM), $\alpha 3\beta 4$ ($K_i = 46,900 \pm 3200$ nM), $\alpha 4\beta 2$ ($K_i = 5860 \pm 880$ nM), $\alpha 4\beta 4$ ($K_i = 40,000 \pm 1600$ nM), $\alpha 6\beta 4$ ($K_i = 49,400 \pm 4100$ nM), $\alpha 7$ ($K_i = 10,500 \pm 200$ nM). Of course, the possibility exists that **3d** might still be acting via a subtype that was not specifically examined. However, because $\alpha 4\beta 2$ receptors represent a major population of nACh receptors in mammalian brain, it seems unlikely that **3d** produces its antinociceptive effects via such a mechanism. Compound **3d** was also examined at 75 other neurotransmitter receptors (CEREP) and displayed remarkably low affinity for each; for example: $K_i > 10,000$ nM for hA_1 , hA_2 , and hA_3 adenosine receptors, α_1 -, α_2 -, $h\beta_1$ -, $h\beta_2$ -adrenergic receptors, central and peripheral BZ receptors, hD_1 – D_5 dopamine receptors, H_1 and H_2 histamine receptors, hm_1 – m_5 muscarinic cholinergic receptors, μ -, δ -, and κ -opioid receptors, $h5$ -HT_{1A}, 5-HT_{1B}, 5-HT_{2B}, 5-HT_{2C}, 5-HT₃, 5-HT_{5A}, 5-HT₆, and 5-HT₇ serotonin receptors, nor did it bind at the norepinephrine or dopamine transporter, or to K^+ , Na^+ , Ca^{++} , or Cl^- ion channels.

Compounds **9**⁶ and **10**⁷ are other examples of previously reported conformationally-constrained nicotine analogs. Both lack significant affinity for $\alpha 4\beta 2$ nACh receptors yet possess antinociceptive character. Whereas the antinociceptive action of **10** was attenuated by mecamylamine,⁷ that of **9**,⁶ like that of **3d**, was not. The aminotetrahydroisoquinoline moiety common to **3d** and **9** and might be responsible for their antinociceptive properties.



In summary, with respect to interaction at $\alpha 4\beta 2$ nACh receptors, it is quite doubtful that the aminotetrahydroisoquinolines **3**, represent pharmacologically important conformations of **1** due to their low affinity. Nevertheless, compound **3d** in particular displayed antinociceptive actions both in the tail-flick and hot-plate assays and, as such, might represent an interesting structural and mechanistic template for further development of novel analgesic agents.

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- Assays were performed as previously detailed in: Dukat, M.; Damaj, I. M.; Young, R.; Vann, R.; Collins, A. C.; Marks, M. J.; Martin, B. R.; Glennon, R. A. *Eur. J. Pharmacol.* **2002**, *435*, 171–180. In brief, the binding assay was conducted using rat brain (minus cerebellum) homogenates and [³H](–)-nicotine as radioligand. IC₅₀ values were determined from a plot of the log concentration versus percent displacement and converted to K_i values (at least in triplicate). The tail-flick assay employed male ICR mice (20–25 g; Harlan Laboratories, Indianapolis, IN) that were housed in an AALAC approved facility in groups of six and had free access to food and water. The study was approved by the Institutional Animal Care and Use Committee of VCU. The antinociceptive response was calculated as percent maximum possible effect (%MPE) where

%MPE = [(test-control)/(10-control)] × 100. Groups of 6–12 mice were used for each dose, and mice were tested 5 min after either subcutaneous or intrathecal injections. Intrathecal injections were performed free-hand between the L5 and L6 lumbar space in unanesthetized mice according to the method of Hylden and Wilcox⁹ using a 30-gauge needle attached to a glass microsyringe. The injection volume in all

cases was 5 µL. In the hot-plate test, mice were placed into a 10 cm wide glass cylinder on a hot plate (Thermojust Apparatus) maintained at 55°C, and the antinociceptive response was calculated as %MPE. Groups of 6–12 mice were used for each dose, and mice were tested 5 min after subcutaneous injections.

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